

Brenda S. Catalanatto, CPA, LLC

6965 Jefferson Highway, Baton Rouge, LA 70806-8116

Telephone (225) 923-2285 ♦ Fax (225) 923-2304

E-Mail: brenda@bscatcpa.com

TO: _____

This letter is written to advise you of the terms of my engagement and the nature and extent of income tax services to be provided.

I will prepare your Federal and State Income Tax Returns for **2011** based on the information you have provided to me. I expect this information to be authentic, reliable and accurate to the best of your knowledge, and that you have disclosed all the relevant facts pertaining to your tax returns. I may ask for some additional clarification of certain aspects of this information.

My fees for the services provided will be determined by the hourly billing rate of any staff who aids in the preparation of your returns. There will be additional fees for costs such as phone calls, copies, or postage and handling. The **minimum** fee for tax services is **\$275 per tax return**. *All efforts to file your tax return by the tax deadline will be made, however any data received after **Monday, 3/26/2012** could result in us filing an extension on your behalf.* October 15th is the final deadline to file your return. We ask that all data needed to complete your return before this deadline be in our office by **9/14/2012**. Any returns in which data is received after 9/14/12, will be assessed a \$75 fee to cover overtime costs for staff to insure a timely filed return.

Please be aware that your returns are subject to examination by taxing authorities, which could generate IRS or State letters or inquiries. In the event of an audit, you may be requested to produce documents, records or other evidence to substantiate income and deductions shown on your return, so please retain all your documents, receipts, cancelled checks and any other records you might have in your possession.

In the event of a notice/audit being generated by a taxing authority, I will assist you in corresponding/representing you with the taxing authority to resolve the issues at additional fees based on the time encompassed. If the error on your return is the firm's fault, I will do this work at no charge to you, however you will be responsible for any tax, penalties or interest assessed. As part of our work, I will put forth every effort to have any penalties abated.

It is our firm policy to maintain records for a maximum of five years after the tax year has ended. Should it become necessary, we can provide you with copies of any information within our files during this time period; however you will be charged for copies, phone calls, faxing, emails, and postage.

If any dispute, controversy or claim arises during our business relationship, either party may, upon written notice to the other party, request that the matter be mediated. Such mediation will be conducted by a mediator appointed by and pursuant to the Rules of the American Arbitration Association or such other neutral facilitator acceptable to both parties. Both parties will exert their best efforts to discuss with each other in good faith their respective positions in an attempt to finally resolve such dispute or controversy.

In the event any member(s) of the firm be required to attend a deposition or any other court related matter on your behalf or as a result of our business relationship, you will be responsible for all fees based on the hourly rate of the applicable member(s) of the firm. Any fees for time spent on copying and/or emailing documents, postage, phone calls, or meetings related to any deposition or court matter will also be part of your responsibility.

If the foregoing is in accordance with your understanding of the terms and conditions of my engagement letter, please sign this letter where indicated and return to us by mail or bring it with you to your tax appointment.

Please feel free to contact my office with any questions relating to this engagement letter. I look forward to working with you to provide timely and quality service.

BRENDA S. CATALANATTO, CPA, LLC

READ, UNDERSTOOD AND ACCEPTED BY:

Signature

Date

Please print or type name

Phone Number

Signature

Date

Please print or type name

Phone Number